

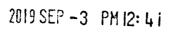
Control Number: 49779



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ELECTRICITY BROKER REGISTRATION FORM CLERK

PROJECT NO. 49779

1. Check the most appropriate box to describe this submission:							
☐ This is a new broker registration							
☑ This supplies information for a pending broker registration							
☑ This amends an existing, completed broker registration							
Provide an explanation of the amendment: PUCT Project No. 49779 any and all brokers MUST file a completed interim registration form in PUCT Project No. 49779							
2 Authorized Representative or Attorney to contact about this application							
Name DARNELL LAMONT FULLER			Title OWNER				
Business Address ₄₄₀₃	B DIAMOND SPRINGS DRIVE		*				
City _{MISSOURI} CITY	State _{TEXAS}	Zip ₇	7459				
Telephone Number (2)	81) 802-7729						
Email Address DARNE	ELL@THEFULLERSGROUP.COM						
3 Registering Entity	List the registering entity's legal na	ime, bus	siness address, and telephone number				
Name DARNELL FULL	ER						
Business address 4403 DIAMOND SPRINGS DRIVE							
City MISSOURI CITY	State _{TEXAS}	Zip ₇₇	7459				
Telephone Number (2)	81) 802-7729						
4 Type of organization of registering entity							
☑ Sole proprietor ☐ Corporation ☐ Limited Liability Co ☐ Limited Partnership	□ Other						

5 Description of the brokerage services provided by the registering entity and type of customers served					
Description of Services: ELECTRICITY BROKERAGE					
Types of Customers: (леск ин тин арргу				
☑ Residential ☑ Commercial	☑ Industrial ☑ Municipalities	□ Other			
2 Commercia	E3 Wanterplanties				
6. Other Names List any trade, commercial, and doing-business-as (d b a) names, other than the legal name listed in =3 above, under which the registering entity intends to operate. Any name in which a corporation intends to operate must be registered with the Secretary of State.					
1st TFG GROUP LLC		^{2nd} THE FULLERS GROUP			
3 rd	4 th	5 th			
	s Attachment A, the names, bu officers, directors, and partners.	siness addresses, email addresses, and phone numbers of as applicable			
☐ Attachment A					
8. Customer Service Contact List the telephone number and email address of the customer service department. If the registering entity does not have a dedicated customer service department, then provide the name, title, address, email address, and telephone number of the customer service contact person					
Customer Service Department	Telephone Number (281) 802-7729	Email Address darnell@thefullersgroup.com			
Name DARNELL FULLER		TitleOWNER			
Business address ₄₄₀₃	DIAMOND SPRINGS DRIVE				
City _{MISSOURI} CITY	State _{TEXAS}	Zip ₇₇₄₅₉			
Telephone Number 28	31-802-7729				
Email Address darnell@thefullersgroup.com					
9. Regulatory contact for a regulatory contact		al business address, telephone number, and email addres			
Name Darnell Lamont i	Fuller	TitleOwner			
Business address ₄₄₀₃ Diamond Springs Drive					
City Missouri City	State _{Texas}	Zip ₇₇₄₅₉			
Telephone Number (2	81) 802-7729				
Email Address darnell	@thefullersgroup.com				

10. Secretary of State Record. Entities who must register with the Secretary of State must provide a copy of the certificate of status issued by the Texas Secretary of State certifying that the registering entity is authorized to transact business in Texas.							
☐ Copy of Secretary of State certificate of status is attached.							
			•				
<i>:</i>							

AFFIDAVIT

My name is Darnell L. Fuller	. I am the Owner	of the Registering Entity.	
competent to testify to them, and the registering entity. I further swear correct and complete and that any Utility Commission of Texas in a transfer of the competence of the	nat I have the authority to or affirm that all staten substantial changes in st imely manner. I swear of ments of the applicable	ts stated in the attached registration, that I is submit this application form on behalf of ments made in the Registration Form are truch information will be provided to the Pulor affirm that the registering entity understandary and rules, including customer protect es for retail electric service.	the rue, blic nds
	Signature of Register	Entity's Owner, Partner, or Officer	
	Printed Name	iell Fuller	
	Name of Registering	Entity Entity	
Sworn a	and subscribed before m	the this 29 day of Angust, 20	19 Tear
Notary Public State of Texas ID # 129126774 My Comm. Fxpires 09-14-2020	Notary Public in and My commission exp		